

MoM - Bekaa MHPSS TF

Date	26th of February 2019	Venue	UNHCR - Zahle
Time	12:00pm to 1:00pm	Minutes prepared by	Alain Gebrayel (MOPH-National Mental Health Program)

Organizations attending	Caritas Lebanon, Fundación Promoción Social de la Cultura (FPS), Himaya, Humedica, International Committee of the Red Cross, International Medical Corps, International Organization for Migration (IOM), Intersos, Magna, Makhzoumi Foundation, Medecins Du Monde, Medecins Sans Frontieres – Belgium, Medair, Ministry of Public Health – National Mental Health Programme, Mousawat, Relief International, UNHCR
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Agenda

1. **MHPSS TF Action Plan 2019 Implementation Scheduling**
2. **Discussions around Challenges Related to Triage for Referral to Psychiatric Admission**
3. **Updates on Information Management Systems, MHPSS and 4Ws**
4. **Any Other Business**

Discussion	Action / Decision / Suggestion
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1. MHPSS TF Action Plan 2019 Implementation Scheduling

The MHPSS TF 2019 Final action plan developed by the task force includes the following actions:

1. Develop criteria for triage of persons to be admitted for psychiatric admission.
2. Roll-out self-care training for frontliners.
3. Develop staff care policy for NGOs.
4. Harmonize compensation of mental health professionals across organizations.
5. Create consensus among actors on a model for technical support and supervision for mental health in organizations.
6. Harmonize clinical files across organizations.
7. Establish mental health emergency response mechanism.

The below numbered decisions correspond to the action plan objectives on the left:

1. Objective to be implemented in Q1. First step will be focused discussions on challenges related to triage for referral to psychiatric admission with organizations during the MHPSS TF meeting. After that interviews will be conducted with psychiatrists working in referring organizations about the challenges faced. Based on the situation analysis, criteria will be drafted and reviewed by the MHPSS TF. They will then be piloted.

<ol style="list-style-type: none"> 8. Scale-up capacity-building for emotional crisis management among frontliners. 9. Increase substance use response services in North and South. 10. Develop shelters/supported housing for persons with mental health disorders. 11. Integrate the standardized M&E tools developed in MHPSS programs and ensure monitoring system. 12. Increase services for children with special needs in remote and rural areas. 13. Develop guidelines for evidence-based quality MHPSS services for children. 	<ol style="list-style-type: none"> 2. Implementation has begun (Q1), the plan for roll-out of the trainings is under development. Trainings are based on the national self-care training manual for frontliners developed in 2018 by MOPH and Abaad in line with the 2018 Action Plan of the Task Force. 3. Funding has been secured for this objective. Implementation will begin in Quarter 2. 4. The process will start in Q2 with an online anonymous survey to clinical psychologists working in organizations to get their feedback on what they find reasonable in terms of ranges and benefits. Organizations will also be asked to send their salary scale and benefits package if possible. 5. Implementation will begin in Q4 6. Q4. A standardized clinical file template for the Community Mental Health Centers is currently under development. Building on that, a template will be developed for mental health service providing organizations. 7. Funding needed. The national mental health program is starting discussion with the Lebanese Red Cross on this objective. All those who wish to support in this objective can meet with the program bilaterally to discuss how to
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move forward.

8. Budget is secured for 2019 with FPS and further trainings will be given. In 2018, 5 groups of frontliners were trained in Beirut and all governates in Lebanon.
9. For the North funding is secured as part of project with Skoun and Medecins Du Monde funded by Agence Française de Développement in line with the national mental health and substance use strategy for Lebanon. Implementation will begin towards the end of 2019. Funding is needed for the South.
10. This objective has no funding. All those who wish to support in this objective can meet with the program bilaterally to discuss how to move forward.
11. Q1. This project is funded by IMC. We are currently in the process of hiring a consultant to develop with the task force in a participatory process the M&E tools.

Coordination has started with the PSS committee to join efforts around PSS and set out a joint action plan. The three 11, 12 and 13 set by the MHPSS TF will be part of the joint action plan.

2. Discussions around Challenges Related to Triage for Referral to Psychiatric Admission

- The objective of “Developing criteria for triage of persons to be admitted for psychiatric admission.” In the 2019 MHPSS TF action plan came from the challenge raised that there are long waiting lists for referral to admission to inpatient psychiatric care and thus the need to have triage criteria to prioritize cases. In preparation for the development of the criteria, a focused discussion was held during the MHPSS TF meeting on the following questions to probe on the matter:

Knowing that there are challenges concerning bed availability, time for admission and mobility/transportation:

- What are the specific operational challenges you face related to triage?
- Have you done anything to face these challenges?
- What worked and what did not work?
- What are the lessons learned?
- Do you have any suggestions?

- Other challenges in relation to hospitalization that were raised by actors and that are not related to triage but to the challenge of securing hospital bed for persons in need of hospitalization:

- Lebanese Red Cross emergency medical service volunteers are obliged to leave the patient and organization staff as soon as they transport to the psychiatric hospital.
- ER staff are not always qualified to manage mental health emergencies.
- Referring organization staff should always be available with persons to be admitted to psychiatric care because close follow up is needed especially upon admission.
- **Suggestion:** Referral of persons whom have been admitted to inpatient psychiatric care to other inter-sectoral services such as cash assistance to help their families sustain expenses.
- **Suggestion:** Conduct a meeting after discharge with the psychiatrist, referring organization, person admitted to inpatient psychiatric care and their family to set up an action plan.

- **FPS and IMC:**

- Criteria for persons to be admitted for psychiatric inpatient care:
 - **Acute psychosis**
 - **Risk of self-harm or harm to others**
 - **Stabilization**
 - **Conflicting or misdiagnosis between psychiatrists and psychologists**
- Challenge in stabilization of persons to be transferred by Lebanese Red Cross to the psychiatric inpatient care.

- One medical staff per shift in all hospitals in Lebanon have been trained on psychiatric emergencies by the Ministry of Public Health – National Mental Health Program in collaboration with WHO. Advanced trainings for all the ER staff of a selected pool of hospitals in all governorates was conducted. The next phase will include tailored comprehensive capacity-building of these selected pool of hospitals.

<p>➤ Other challenges:</p> <ul style="list-style-type: none"> ○ Rupture in psychotropic medication in the Bekaa for both YMCA and national list of psychotropic and neurological medications for humanitarian response medication. 	<ul style="list-style-type: none"> ➤ Whenever there is a rupture in medication, kindly inform Alain Gebrayel (Gebrayel.alain@gmail.com) or Nour Kik (Nourjkik@gmail.com) so that the situation can be assessed and the needed amount of medication possibly provided. ➤ The process of revision of the national list of psychotropic and neurological medications for humanitarian response will start end of 2019.
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3. Updates on Information Management Systems, MHPSS and 4Ws

<ul style="list-style-type: none"> ➤ 4Ws Online Platform: <ul style="list-style-type: none"> ○ 40 organizations registered ○ 24 active organizations ○ 175 activities published until February 12th ➤ MHPSS Monthly Indicators: <ul style="list-style-type: none"> ○ 26 organizations registered ○ 18 organizations reported in January 	<ul style="list-style-type: none"> ➤ Kind reminder that the deadline to submit the online monthly report for January is on the 15th of February. System would close after that! ➤ Whenever you are done reviewing or reporting on the MHPSS indicators, do not forget to send to facility director <p>Kindly request a meeting with us for a walkthrough of any of the mentioned platforms. Any challenges? Questions? Please contact: Alain Gebrayel -</p>
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4. Any Other Business

- **MOPH Director General Circular No. 60, Issued on 20/06/2018 related to rational prescription of medication for priority mental and neurological conditions: [Arabic Link](#) – [English Link](#)**
- The National Mental Health Program developed tools for prescription of medication for priority mental health and neurological conditions. The tools are the following:
 - National list of psychotropic and neurological medications for humanitarian response
 - Guide for the rational prescription of medications for priority mental and neurological conditions for specialists in the public health system” which will be updated on a regular basis.
- **Kindly note that MHPSS TF meetings in the Bekaa will take place on every third Tuesday of each month.**

- The MOPH urges all organizations, community mental health centers, primary health care centers and hospitals to comply with these tools at the outpatient level.

Next meeting: (**Tuesday the 19th of March** from 12:00 to 1:00pm, UNCHR - Zahle)